

Electronic Filing System (EFS) Data
Electronic Patent Application Submission
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Application ID: 09681865
Title of Invention: TUFTED SURFACE COVERING AND METHOD
First Named Inventor: Ian Walters
Domestic/Foreign Application: Domestic Application
Filing Date: null
Effective Receipt Date: 2001-06-19
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Attorney Docket Number: 01,175
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Total Fees Authorized: \$436.0

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TRANSMITTAL FORM



Electronic Version 1.0.2

Stylesheet Version: 1.0

Attorney Docket Number:

01,175

TUFTED SURFACE COVERING AND METHOD

First Named Inventor: Mr. Ian D. Walters

SUBMITTED BY

Name: Marcia J. Rodgers Esq.

Registration Number: 33765

Electronic Signature Mark: Marcia J. Rodgers, Esq.

Date Signed: 20010619

I certify that the use of this system is for OFFICIAL correspondence between patent applicants or their representatives and the USPTO. Fraudulent or other use besides the filing of official correspondence by authorized parties is strictly prohibited, and subject to a fine and/or imprisonment under applicable law.

I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

| | |
|------------------|----------------|
| specification | walters.xml |
| declaration | Declar.tif |
| declaration | Declar2.tif |
| bibd-transmittal | wal175apds.xml |
| fee-transmittal | wal175fee.xml |

Attached Image File(s):

Declar.tif

Declar2.tif

DECLARATION OF THE PRESIDENT OF THE UNITED STATES

Comments:

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**DECLARATION AND POWER OF ATTORNEY
FOR A PATENT APPLICATION**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled TUFTED SURFACE COVERING AND METHOD, as described and claimed in the specification which is filed herewith.

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to in the oath or declaration.


I acknowledge the duty to disclose to the Patent and Trademark Office all information which is known to me to be material to the patentability of this application as defined in Title 37, Code of Federal Regulations, Sec. 1.56.

I hereby appoint Marcia J. Rodgers, Reg. No. 33,765; Malcolm A. Litman, Reg. No. 19,579; Gerald M. Kraai, Reg. No. 34,854; Mark E. Brown, Reg. No. 30,361; Kent R. Erickson, Reg. No. 36,793; and Mark L. Kleypas, Reg. No. 43,720; all members of the bar of the State of Missouri, whose postal address is Shughart Thomson & Kilroy, P.C., Twelve Wyandotte Plaza, 120 West 12th Street, Kansas City, Missouri 64105, telephone (816) 421-3355 as my attorneys, with full power of substitution, to prosecute this application, to make alterations and amendments therein, to receive the patent, and to transact all business in the Patent Office connected therewith in my behalf.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are
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punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Date: 19 June 2001


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FEE TRANSMITTAL

Electronic Version 1.0.4

Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Small Entity

Independent Inventor

TOTAL FEES AUTHORIZED: \$ 436

BANK (CREDIT) CARD INFORMATION:

Credit Card Number: 4233
Expiration Date: 20020202
Authorized Name: Shughart Thomson Kilroy
Billing Address: 64105

BASIC FILING FEE

| Fee Description | Fee Code | Fee Paid |
|--------------------|----------|----------|
| Utility Filing Fee | 201 | \$ 355 |

Subtotal For Basic Filing Fee: \$ 355

EXTRA CLAIM FEES

| | Fee Code | Fee | Extra Claims | Fee Paid |
|-----------------------|----------|-------|--------------|----------|
| Total Claims: 29 | 203 | \$ 9 | 9 | \$ 81 |
| Independent Claims: 3 | 202 | \$ 40 | 0 | \$ 0 |

Subtotal For Extra Claims Fees: \$ 81